U.S. Department of Labor Office of Labor-Management 'Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only	S Recd me
E ( AUG 1 1 PAUD	REFULLY BEFORE PREPARING THIS REPORT.
MS DAY	
1. File Number U-55727	2. Fiscal Year Covered From:
/	[1] / [2004 Through: [12 / 31] / [2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name OSCAR B. GILES, JR.	Name Bakery, Confectionery, Tobacco Worke & Grain Millers Union, Local 203T Labor Organization File Number 014678
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 231 E. Belt Blvd.	Street 231 E. Belt Blvd.
City Richmond,	City Richmond,
State Virginia ZIP Code + 4 23224	State Virginia ZIP Code + 4 23224
5. Position in tabor organization. President	
A. Held an interest in, engaged in transactions (including loans) we monetary value from an employer whose employees your organized.	Infration represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name :	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7 h Amount
Street	7.b. Amount.
City	
State ZIP Code + 4	
	Signature
	nalty of Perjury and other applicable penalties of the law, that all of the information ompanying documents), has been examined by the signatory and is, to the best of the e the section on penalties in the instructions.)
Signed Open B Sulin	on 7/21/05 (804) 230-0003
	Date Telephone Number

OSCAR B. GILES, JR.	Tile Namber 0-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization repressible or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is Interested.		
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.  Name	11.a. Nature of such dealing.	
P.O. Box, Bldg., Room No., if any Street	11.b. Approximate dollar value of such dealing.	
State ZIP Code + 4	12.a. Nature of interest held or income received.	
	12.b. Amount.	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).  Name PHILIP MORRIS USA  Trade Name, if any:  P.O. Box, Bidg., Room No., if any PO BOX 26603  Street  City Richmond  State Virginia ZIP Code + 4 23261	Golf after Negotiations Richmond, Va. 10/14/04	
13.b. Is the Business an Employer  or Consultant ?	14.b. Amount of payment. \$35.00	